

POSITION	INITIALS	ID NO.	DATE
	<i>me</i>		5/24/01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		913	6/22/01
FORMALITY REVIEW	H-T		07/24/01
RESPONSE FORMALITY REVIEW	SA	SC1039	07/08/02

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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SC 4/913

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 0208-01

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